

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 29, 1999

Application or Docket Number

676347

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	23 minus 20= *	3
INDEPENDENT CLAIMS	2 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY  
TYPE OTHER THAN  
SMALL ENTITY  
OR

RATE	FEES	RATE	FEES
	345.00		690.00
OR		OR	
X\$ 9=		X\$18=	54.00
OR		OR	
X39=		X78=	
OR		OR	
+130=		+260=	
OR		OR	
TOTAL		TOTAL	744.00

SMALL ENTITY  
OR  
OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
OR		OR	
X39=		X78=	
OR		OR	
+130=		+260=	
OR		OR	
TOTAL		TOTAL	ADDI. FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
OR		OR	
X39=		X78=	
OR		OR	
+130=		+260=	
OR		OR	
TOTAL		TOTAL	ADDI. FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
OR		OR	
X39=		X78=	
OR		OR	
+130=		+260=	
OR		OR	
TOTAL		TOTAL	ADDI. FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

**NOTICE OF FILING / CLAIM FEE(S) DUE  
(CALCULATION SHEET)**

APPLICATION NUMBER: 676347

**Total Fee Calculation**

Fee Code	Total # Claims	Number Item	X	Fee		Fee	Total
				Sm. Entity	Lg. Entity		
Basic Filing Fee	<u>201/101</u>						<u>690.00</u>
Total Claims >20	<u>203/103</u>	<u>28</u>	<u>20</u>	<u>3</u>	X		<u>54.00</u>
Independent Claims >3	<u>203/102</u>	<u>2</u>	<u>3</u>	X			
Mult. Dep. Claim Present	<u>204/104</u>						
Surcharge	<u>205/105</u>						<u>130.00</u>
English Translation	<u>139</u>						

**TOTAL FEE CALCULATION**

Fees due upon filing the application:

Total Filing Fees Due = \$ 874.00

Less Filing Fees Submitted = \$ 1

BALANCE DUE = \$ 874.00

James Washington  
Office of Initial Patent Examination

Figure 7